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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/758,613	01/15/2004	Ruupak Nanyamka Omar		6346	
MR. RUUPAK	7590 07/03/2007 OM A P	EXAMINER			
SPORT STARS INCORPORATED 18946 VICKIE AVENUE #294			HYLINSKI, ALYSSA MARIE		
			ART UNIT °	PAPER NUMBER	
CERRITOS, CA 90703			3711		
			•		
			MAIL DATE	DELIVERY MODE	
			07/03/2007	PAPER	

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

## **Interview Summary**

Application No.	Applicant(s)
10/758,613	OMAR, RUUPAK NANYAMKA
Examiner	Art Unit
Alyssa M. Hylinski	3711

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All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>Alyssa M. Hylinski</u> .	(3) <u>Andrew Ulmer</u> .		
(2) <u>Eugene Kim</u> .	(4)		
Date of Interview: 26 June 2007.			
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant	2)⊡ applicant's representative	.]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		
Claim(s) discussed: 22.			
Identification of prior art discussed: applied prior art.			
Agreement with respect to the claims f) was reached.	g)⊡ was not reached. h)⊠ N	//A.	
Substance of Interview including description of the genera reached, or any other comments: <u>Applicant discussed posconsideration will be given</u> .			
(A fuller description, if necessary, and a copy of the amendallowable, if available, must be attached. Also, where no allowable is available, a summary thereof must be attached.	copy of the amendments that w		
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW DATE, OF THE SUBSTANCE OF THE INTERQUIREMENTS on reverse side or on attached sheet.	e last Office action has already OF ONE MONTH OR THIRTY FERVIEW SUMMARY FORM, '	been filed, APP ' DAYS FROM T WHICHEVER IS	LICANT IS THIS LATER, TO

Examiner Note: You must sign this form unless it is an

Attachment to a signed Office action.

Examiner's signature, if required